

P0200012372

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)205-0380

From: Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

REGISTERED AGENT CHANGE

SONNY'S AUTO GLASS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

RECEIVED

07 AUG 20 AM 8:00

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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Bonny's Auto Glass, Inc.
2. The principal office address: 3881 SW 164th Terrace, Miramar, FL 33027
3. The mailing address (if different): _____
4. Date of incorporation/qualification: November 18, 2002 Document number: P020001237 28
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Regina Zolyomi
200 Palm Circle West, #302
Pembroke Pines, FL 33029

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Regina Zolyomi
3881 SW 164th Terrace
(P.O. Box NOT acceptable)
Miramar, FL 33027

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]
(Signature of an officer or director)

President - Director
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature]
(Signature of Registered Agent)

08/02/07
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/03)

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